



Name: _____

CONFIRMATION II SERVICE ACTIVITY UPDATE

**WHO WILL YOU BE SERVING?
(name of person or organizations)**

SIGNATURE OF PERSON RECEIVING SERVICE or ORGANIZATION SUPERVISOR

Signature: _____ **Date:** _____

IS THIS THE SAME SERVICE ACTIVITY YOU DID LAST YEAR?

Yes _____ No _____

**WHAT KIND OF WORK/SERVICE WILL YOU BE DOING AND HOW OFTEN WILL YOU
BE DOING IT? (please give a specific description)**

**HOW/WHY DID YOU CHOOSE THIS SERVICE ACTIVITY, AND IN WHAT WAYS WILL
IT CHALLENGE YOU?**

DUE BY THANKSGIVING